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**MAY 22 2007**

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4743 7590 02/22/2007

**MARSHALL, GERSTEIN & BORUN LLP**  
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5/18/07	(Date)

**05/22/2007 FMETEK12 00000029 10089861**

<b>01 FC:1501</b>	<b>1400.00 0P</b>	<b>02 FC:8001</b>	<b>9.00 0P</b>	-FIRST NAMED INVENTOR-	-ATTORNEY DOCKET NO.-	CONFIRMATION NO.
APPLICATION NO.	FILING DATE					

10/089,861 08/08/2002 Paris Tsangaris 328 P 653 1394

TITLE OF INVENTION: ELECTRO-ACOUSTIC TRANSDUCER WITH RESISTANCE TO SHOCK-WAVES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$0	\$1400	05/22/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
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LE, HUYEN D 2615 381-417000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list <input type="checkbox"/> the names of up to 3 registered patent attorneys or agents OR, alternatively, <input type="checkbox"/> the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1. <u>Marshall,</u> 2. <u>Gerstein &amp;</u> 3. <u>Borun LLP</u>
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Knowles Electronics, LLC.

Itasca, Illinois

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are submitted:

Issue Fee  
 Publication Fee (No small entity discount permitted)  
 Advance Order - # of Copies 3

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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13-2855 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature 

Date 5/18/07

Typed or printed name Anthony G. Sitko

Registration No. 36,278

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